

USE THIS FORM FOR ALL ENTRIES EXCEPT CRAFTS

THE CLEVELAND MUSEUM OF ART  
FORTY-NINTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE  
MAY 3 to JUNE 18, 1967

Born in Cleveland ☐ YES ☒ NO

Entered Previous May Shows? ☐ YES ☒ NO

PLEASE  
LETTER  
PLAINLY  
OR TYPE

Collaborator if any NONE

Artist

JOEL

Fisher

FIRST NAME

LAST NAME

Address 5014 GLENWOOD AVE, YOUNGSTOWN, OHIO, MAHoning

Tel. 782-0228

NO.

STREET

CITY

ZIP CODE

COUNTY

Out-of-town residents should state whether return shipment is required. ☐ YES ☒ NO

Please bring Registration Fee of \$2.00 (Cash or Check) with your entries.

CLASS <u>1</u>	MEDIUM <u>Collage</u>	CL ASS <u>I</u>	MEDIUM <u>Collage</u>	CL ASS <u>I</u>	MEDIUM <u>Collage</u>			
TITLE <u>Valentine for Yesterday</u>		TITLE <u>Earth Wounds # 2</u>		TITLE <u>In time of war all songs are war songs</u>				
DESCRIPTION OF OBJECT <u>34" x 48"</u>		DESCRIPTION OF OBJECT <u>24" x 24"</u>		DESCRIPTION OF OBJECT <u>24" x 24"</u>				
NUMBER FOR SALE <u>1</u>	NUMBER IN EDITION (GRAPHIC PRts.)	PRICE <u>\$70</u>	NUMBER FOR SALE <u>1</u>	NUMBER IN EDITION (GRAPHIC PRts.)	PRICE <u>\$60</u>			
Artist <u>JOEL FISHER</u> FIRST NAME LAST NAME			Artist <u>JOEL FISHER</u> FIRST NAME LAST NAME					
<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>ACCEPTED</span> <span>REJECTED</span> </div> <div style="display: flex; justify-content: space-between;"> <span><u>400</u></span> <span><u>X</u></span> </div> </div>			<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>ACCEPTED</span> <span>REJECTED</span> </div> <div style="display: flex; justify-content: space-between;"> <span><u>401</u></span> <span><u>X</u></span> </div> </div>			<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>ACCEPTED</span> <span>REJECTED</span> </div> <div style="display: flex; justify-content: space-between;"> <span><u>402</u></span> <span><u>X</u></span> </div> </div>		
DO NOT WRITE IN THIS SECTION			DO NOT WRITE IN THIS SECTION					

This entry blank must be fully made out (typewritten or plainly lettered for catalog purposes) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1967.

It is also understood that accepted entries will remain on exhibition until June 18 1967.

The submission of entries will be construed as acceptance of all conditions printed in this entry blank.

Joel Fisher  
SIGNATURE

SUBMIT ENTRIES WITH ENTRY BLANK AND  
FEE MARCH 11 THROUGH MARCH 18, 1967.

Submit one entry blank in triplicate per person. One copy, complete with juror's marks, will be returned to you as notification of acceptance or rejection. THIS COPY IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This form in duplicate is made up of N C R paper which does not require carbon.

RETURN DATES FOR OBJECTS - Monday through Saturday 9 a.m. - 4:45 p.m. at Museum Service Entrance

REJECTED: May 6 - May 20

ACCEPTED: June 23 - July 8